Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Identify Yourself			
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case	;) :
our full name			
Vrite the name that is on	Shawn	Tonja	
icture identification (for	First name	First name	
	Kelvin	Richardson	
cense or passport).	Middle name	Middle name	
ring your picture lentification to your	Whitaker	Whitaker	
neeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
II other names you have sed in the last 8 years			
nclude your married or naiden names.			
Only the last 4 digits of our Social Security umber or federal ndividual Taxpayer dentification number TIN)	xxx-xx-8712	xxx-xx-4075	
	our full name /rite the name that is on our government-issued cture identification (for xample, your driver's cense or passport). ring your picture entification to your leeting with the trustee. Il other names you have sed in the last 8 years aclude your married or leaden names. Inly the last 4 digits of our Social Security umber or federal idividual Taxpayer lentification number	About Debtor 1: Shawn First name Crite the name that is on pur government-issued cture identification (for kample, your driver's bense or passport). Fing your picture entification to your peeting with the trustee. Whitaker Last name and Suffix (Sr., Jr., II, III) II other names you have seed in the last 8 years acclude your married or naiden names. Inly the last 4 digits of pur Social Security umber or federal dividual Taxpayer lentification number About Debtor 1: Shawn First name Whitaker Last name and Suffix (Sr., Jr., II, III)	About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case Only in a J

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Debtor 1 Shawn Kelvin Whitaker
Debtor 2 Tonja Richardson Whitaker

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
Include trade names and doing business as names	Business name(s)	Business name(s)			
	EINs	EINs			
Where you live	14891 NC HWY 43 Whitakers NC 27891	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Nash County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs ### 14891 NC HWY 43 ### Whitakers, NC 27891 Number, Street, City, State & ZIP Code Nash County			

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	otor 1 Shawn Kelvin White otor 2 Tonja Richardson					Case n	umber (if known)	
Par	t 2: Tell the Court About Y							
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and o			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	☐ Chapt	er 7					
		☐ Chapt	er 11					
		☐ Chapt	er 12					
		■ Chapt	er 13					
8.	How you will pay the fee	abo ordo a pi	ut how your er. If your a e-printed a ed to pay	the entire fee when I file my petition. Please check with the clerk's office in your local court for more details you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money ur attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with ad address. The provided HTML representation of the prov				
		☐ I re but app	quest that is not requ lies to you	e in Installments (Official For t my fee be waived (You ma uired to, waive your fee, and r family size and you are un n to Have the Chapter 7 Filin	ay request may do so able to pay	only if your incor the fee in install	me is less than 150% oments). If you choose to	of the official poverty line that this option, you must fill out
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	·		District	Eastern District of North Carolina	When	5/10/12	Case number	12-03586-8-DMW
			District	North Carolina	When		Case number	
			District		When		Case number	
					_			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes.	Has you	ur landlord obtained an evict	tion judgme	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.	nt About an	Eviction Judgme	ent Against You (Form	101A) and file it as part of

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_	otor 2 Tonja Richardson		r	Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propri	ietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.			
		☐ Yes.	Name and location of be	usiness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	у		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	tate & ZIP Code		
	it to this petition.		• • •	pox to describe your business:		
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Brol	ker (as defined in 11 U.S.C. § 101(6))		
			☐ None of the about	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you ar	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am not filing under Cha	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	— 100.	What is the hazard?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code		

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Debtor 1 Shawn Kelvin Whitaker

Debtor 2 Tonja Richardson Whitaker

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Shawn Kelvin Wh tor 2 Tonja Richardson		er	Ca	ase number (if kr	nown)		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts	or business del	bts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			s excluded and administrative expenses		
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000		
		□ 100-1 □ 200-9		☐ 10,001-25,000		☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on	□ \$500,000,001 - \$1 billion		
			01 - \$100,000	□ \$10,000,001 - \$50 mil	llion	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	□ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
I request relief in accordance with the chapter of title 1. I understand making a false statement, concealing probankruptcy case can result in fines up to \$250,000, or and 3571.				er of title 11, United States (Code, specified	I in this petition.		
		/s/ Shav	wn Kelvin Whitaker		ja Richardsoi			
			Kelvin Whitaker e of Debtor 1		Richardson W e of Debtor 2	vnitaker		
		Executed	d on October 12, 2018	Executed	d on Octobe	er 12, 2018		
			MM / DD / YYYY		MM / DD			

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Debtor 1 Shawn Kelvin Wh Debtor 2 Tonja Richardson		Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United States for which the person is eligible. I also certify that I I	ates Code, and have e	explained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, cert schedules filed with the petition is incorrect.	ify that I have no know	ledge after an inquiry that the information in the		
	/s/ Josh Hillin for LOJTO	Date	October 12, 2018		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Josh Hillin for LOJTO 28288				
	Printed name				
	The Law Offices of John T. Orcutt, PC				
	Firm name				
	6616-203 Six Forks Road				
	Raleigh, NC 27615				
	Number, Street, City, State & ZIP Code				
	Contact phone (919) 847-9750	Email address	postlegal@johnorcutt.com		
	28288 NC				
	Bar number & State				

Fill	in this inforr	nation to identify you	r case:			
Deb	tor 1	Shawn Kelvin W	hitaker			
		First Name	Middle Name	Last Name		
Deb	tor 2	Tonja Richardso	on Whitaker			
(Spot	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF EXEMPTIONS)	NORTH CAROLINA (NC		
Cas	e number _					heck if this is an
					-	mended filing
Sta Be a	s complete a	of Financial		re filing together, both are	equally responsible for sup	
		nore space is needed, n). Answer every ques		this form. On the top of any	/ additional pages, write yoυ	r name and case
Part	1: Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	Married					
	☐ Not mai					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you li	ived in the last 3 years. Do no	ot include where you live now	' .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ake sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	Explai	in the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$18,669.00	☐ Wages, commissions, bonuses, tips	\$14,432.00
			☐ Operating a business		Operating a business	

Official Form 107

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Debtor 1 Debtor 2	Shawn Kelvin Whitak Tonja Richardson Wh	number (if known)			
		Dalitan 4		Daletano	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a	
	alendar year: 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$26,129.00	☐ Wages, com bonuses, tips	missions, \$12,532.00
		☐ Operating a business		Operating a	business
For the ca	alendar year before that: 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$26,226.00	☐ Wages, com bonuses, tips	missions, \$16,060.00
		☐ Operating a business		Operating a	business
List ea		case and you have income that you come from each source separated Debtor 1 Sources of income	_		ne 4.
		Describe below.	each source (before deductions and exclusions)	Describe below	
Part 3:	List Certain Payments Yo	ou Made Before You Filed for	Bankruptcy		
	No. Neither Debtor 1 nor individual primarily for During the 90 days be No. Go to line Yes List below paid that not include * Subject to adjustment of Subject to adjustment of Subject 1 or Debtor 2 During the 90 days be No. Go to line Yes List below include pattorney for subject 1 nor 1	r a personal, family, or househole efore you filed for bankruptcy, die 7. v each creditor to whom you pai creditor. Do not include payment de payments to an attorney for the ent on 4/01/19 and every 3 years or both have primarily consultation of the error you filed for bankruptcy, die 7. v each creditor to whom you pai ayments for domestic support of this bankruptcy case.	Imer debts. Consumer debtal depurpose." In dyou pay any creditor a total depurpose. The depurpose of the deputpose of the de	in one or more pay pations, such as che or after the date on after the date of \$600 or more?	wments and the total amount you nild support and alimony. Also, do of adjustment. you paid that creditor. Do not Also, do not include payments to a
Cred	litor's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for
	l ordinary payments, in ills and loans.	ı part,	\$0.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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Deb	otor 2	Tonja Richardson Whitaker	Case number (if kno			wn)		
	Cred	litor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for	
		erican Credit Acceptance	8/28/18	\$1,200.00	\$0.00	☐ Mortgage)	
		n: Officer				☐ Car		
	340 Sno	East Main Street, Suite 400 rtanburg, SC 29302				☐ Credit Ca	ard	
	Spa	rtanburg, 3C 29302				☐ Loan Re	payment	
						□ Suppliers	or vendors	
						Other_T	get repo back.	
7.	Inside of wh	in 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you g securities; and an	u are a genera y managing a	al partner; corporations gent, including one for	
	_ `	No						
		Yes. List all payments to an insider.						
	Insic	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that bend insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider 					ebt that benefited an			
		der's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment	
			p	paid	still owe	Include cred		
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	List a modif	in 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details. e title e number			on suits, paternity ad		t or custody	
10.	Checl	in 1 year before you filed for bankrupt k all that apply and fill in the details belown.		rty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?	
	_	Yes. Fill in the information below.						
	Cred	ditor Name and Address	Describe the Property		Date		Value of the property	
			Explain what happened	1			р.оролу	
11.	accor	in 90 days before you filed for bankru unts or refuse to make a payment bed No Yes. Fill in the details.		uding a bank or fiı	nancial institution	set off any a	mounts from your	
			Describe the cation the	araditar tasl	Data	otion	A	
	Cred	litor Name and Address	Describe the action the	creditor took	taken	action was	Amount	
12.	court	n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess	ion of an assignee	e for the bene	fit of creditors, a	
	_	Yes						

Debtor 1 Shawn Kelvin Whitaker

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Debto Debto		Shawn Kelvin Whitaker Tonja Richardson Whitaker		Case nu	mber (if known)	
Part 5	5:	List Certain Gifts and Contribution	s			
13. V	Vithir	n 2 years before you filed for bankro	uptcy,	, did you give any gifts with a total value of m	ore than \$600 per person	?
	_	No .				
		es. Fill in the details for each gift.		D 11 41 40	D :	
		with a total value of more than \$60 person	10	Describe the gifts	Dates you gave the gifts	Value
-	Perso Addro	on to Whom You Gave the Gift and ess:				
14. V	_	n 2 years before you filed for bankro No	uptcy,	did you give any gifts or contributions with	a total value of more than	\$600 to any charity?
] Y	es. Fill in the details for each gift or ce	ontribu	ution.		
ı	more	or contributions to charities that to than \$600 ity's Name	otal	Describe what you contributed	Dates you contributed	Value
		ess (Number, Street, City, State and ZIP Code	e)			
Part 6	6:	List Certain Losses				
	rgan ■ N	mbling?	ptcy o	or since you filed for bankruptcy, did you lose	anything because of thef	it, fire, other disaster
		es. Fill in the details.	D		Data afarana	Malara of managements
		ribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pend ance claims on line 33 of <i>Schedule A/B: Propert</i> i		Value of property lost
Part 7	7:	List Certain Payments or Transfers	3			
C	onsu	ulted about seeking bankruptcy or p	orepar	did you or anyone else acting on your behalf ring a bankruptcy petition? ers, or credit counseling agencies for services re		rty to anyone you
г	7 N	No				
Ī	_ ''	es. Fill in the details.				
ı	Perso Addro Emai	on Who Was Paid ess il or website address	7	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
-	The 6616	on Who Made the Payment, if Not Y Law Offices of John T. Orcutt 6-203 Six Forks Road igh, NC 27615	ou		October 5, 2018	\$200.00
•		AF Goliad Street brook, TX 76126-2009			October 5, 2018	\$15.00
р	romi		litors	did you or anyone else acting on your behalf or to make payments to your creditors? sted on line 16.	pay or transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.				
		on Who Was Paid		Description and value of any property	Date payment	Amount of
	Addr			transferred	or transfer was made	payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Shawn Kelvin Whitaker Debtor 2 Tonja Richardson Whitaker Case number (if known) transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Name of Financial Institution Who else had access to it? Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

for someone.

No

Yes. Fill in the details.

Owner's Name Where is the property? Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Code) Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Shawn Kelvin Whitaker
Debtor 2 Tonja Richardson Whitaker

Case number (if known)

=	Site to c	ulations controlling the cleanup of these e means any location, facility, or propert own, operate, or utilize it, including dispo- cardous material means anything an enve eardous material, pollutant, contaminant	y as defined under any environmental osal sites. vironmental law defines as a hazardous								
Rep		all notices, releases, and proceedings th		n the	ey occurred.						
24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?										
		No Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice					
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?								
		No Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice					
26.	Hav	ve you been a party in any judicial or adn No Yes. Fill in the details.	ministrative proceeding under any envi	ironr	mental law? Include settlements a	nd orders.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case					
	Wit	hin 4 years before you filed for bankrupt A sole proprietor or self-employed it A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin	tcy, did you own a business or have ar in a trade, profession, or other activity, pany (LLC) or limited liability partnersh secutive of a corporation ag or equity securities of a corporation Part 12.	, eith	ner full-time or part-time	business?					
	Bu	Yes. Check all that apply above and fill siness Name	I in the details below for each business Describe the nature of the business	5.	Employer Identification number						
	Ad	Idress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security r						
	11	nity Hair Salon 5-B Nashville Drive ashville, NC 27856	Hair Salon (Rents Booth)		EIN: From-To 4/2012 - Present						
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties. No Yes. Fill in the details below.	tcy, did you give a financial statement	to an	nyone about your business? Inclu	de all financial					
	Ad	me Idress mber, Street, City, State and ZIP Code)	Date Issued								
Offic	•		nent of Financial Affairs for Individuals Filing	g for i	Bankruptcy	page 6					

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Debtor 1	Shawn Kelvin Whitaker		
Debtor 2	Tonja Richardson Whitaker		Case number (if known)
B(40	■ 0' P1		
Part 12:	Sign Below		
I have re	ad the answers on this <i>Statement of Final</i>	ncial Affairs a	nd any attachments, and I declare under penalty of perjury that the answers
are true	and correct. I understand that making a fa	lse statement	, concealing property, or obtaining money or property by fraud in connection
	ankruptcy case can result in fines up to \$2	50,000, or imp	orisonment for up to 20 years, or both.
18 U.S.C	. §§ 152, 1341, 1519, and 3571.		
/s/ Sha	wn Kelvin Whitaker	/s/ To	nja Richardson Whitaker
Shawn	Kelvin Whitaker	Tonja	Richardson Whitaker
Signatu	re of Debtor 1	Signat	ture of Debtor 2
Date (October 12, 2018	Date	October 12, 2018
Did you	attach additional pages to Your Statement	t of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	pay or agree to pay someone who is not a	n attorney to l	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	Name of Person . Attach the Bankrupt	cv Petition Prei	parer's Notice, Declaration, and Signature (Official Form 119).

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Fill ir	this inform	nation to identify you	r case and th	is filinç	g:			
Debte	or 1	Shawn Kelvin W						
		First Name	Middle		Last Name			
Debto		Tonja Richardso						
(Spous	e, if filing)	First Name	Middle	Name	Last Name			
Unite	d States Bar	nkruptcy Court for the:			CT OF NORTH CAROLINA (NC			
Case	number _							Check if this is an amended filing
Sc n each	hedule n category, se t fits best. Be	e as complete and accur e space is needed, attacl	be items. List a	e. If two	only once. If an asset fits in more than one c married people are filing together, both are ev his form. On the top of any additional pages, v	qually responsible fo	or supply	ying correct
Part 1		<u> </u>	<u> </u>		Estate You Own or Have an Interest In			
_	No. Go to Part	, .		•				
•	Yes. Where is	s the property?						
1.1				What	t is the property? Check all that apply			
	14891 NC I	HWY 43			Single-family home	Do not deduct secure	d claims	or exemptions. Put
	Street address, it	if available, or other descriptio	n	_	Duplex or multi-unit building	the amount of any se	cured cla	aims on Schedule D:
					Condominium or cooperative	Creditors Who Have	Claims S	Secured by Property.
,	Whitakers	NC 27	891-0000		Manufactured or mobile home Land	Current value of the entire property?		urrent value of the ortion you own?
-	City	State	ZIP Code			\$80,000.0	-	\$80,000.00
	Oily	Sidie	211 0000			Describe the nature	of your	. ,
					-	a life estate), if know	vn.	
_	Nash			Ш	Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	☐ Check if this is	commu	nity property
					At least one of the debtors and another r information you wish to add about this item, erty identification number:	such as local		
р	ages you ha ■	•	-		your entries from Part 1, including any e			\$80,000.00
Part 2	Describe \	Your Vehicles						

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debto	_	shawn Kelvin Wh onja Richardsor			Case number (if known)	
3. Ca ı	rs, vans,	trucks, tractors, s	sport utility ve	hicles, motorcycles		
	No					
	r'es					
	. 00					
3.1	Make:	GMC		Who has an interest in the property? Check one		ured claims or exemptions. Put
5.1	Model:	Light Duty Ac	adia	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2008		Debtor 2 only	Cicators who riat	re claims decared by 1 reporty.
		nate mileage:	188,941	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		formation:		☐ At least one of the debtors and another	entire property:	portion you own:
	O LITTON III	iorriation.		At least one of the deptors and another		
				Check if this is community property (see instructions)	\$5,200	.00 \$5,200.00
				(00 000 000 000 000 000 000 000 000 000		
3.2	Make:	Chevrolet		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Silverado		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2003		Debtor 2 only		
	Approxir	nate mileage:	106,257	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		formation:		At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$4,660	.00 \$4,660.00
■ 1 □ \					ſ	
5 Ac .pa	ld the do ges you	ollar value of the p have attached for	ortion you ow Part 2. Write	n for all of your entries from Part 2, including that number here	g any entries for =>	\$9,860.00
Part 3	Descri	be Your Personal an	d Household Ite	ems		
Do yo	ou own o	or have any legal o	or equitable in	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex		goods and furnisl Major appliances, fo	•	, china, kitchenware		
	Yes. De	scribe				
		Hou	usehold Goo	ds		\$510.00
	ctronics			eo, stereo, and digital equipment; computers, pri	inters, scanners; music co	ollections; electronic devices
	No	including cell phonesscribe	es, cameras, m	edia players, games		,
	No	escribe	es, cameras, m	edia players, games		\$200.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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	ebtor 1 ebtor 2	Shawn Kelvin Whitaker Tonja Richardson Whitaker	Case number (if known)	
	☐ Yes.	. Describe		
9.		nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby equipment; musical instruments	bicycles, pool tables, golf clubs, skis; canoes and l	kayaks; carpentry tools;
	_	. Describe		
10	Firearr Examp	rms apples: Pistols, rifles, shotguns, ammunition, and related equipmer	nt	
		. Describe		
11.	□ No	aples: Everyday clothes, furs, leather coats, designer wear, shoes	s, accessories	
	■ Yes.	. Describe		
		Wearing Apparel		\$400.00
12.	□ No	ry nples: Everyday jewelry, costume jewelry, engagement rings, wed Describe	dding rings, heirloom jewelry, watches, gems, gold,	silver
		Jewelry		\$120.00
	Examp ■ No □ Yes.	arm animals nples: Dogs, cats, birds, horses Describe		
14.	■ No	ther personal and household items you did not already list, Give specific information	including any health aids you did not list	
15		the dollar value of all of your entries from Part 3, including a Part 3. Write that number here		\$1,230.00
		escribe Your Financial Assets		
D	o you ov	wn or have any legal or equitable interest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	nples: Money you have in your wallet, in your home, in a safe dep		
			Cash	\$125.00
17.		sits of money nples: Checking, savings, or other financial accounts; certificates institutions. If you have multiple accounts with the same in	stitution, list each.	es, and other similar
	Yes	Institution	name:	

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Debtor 1 Debtor 2	Shawn Kelvin White Tonja Richardson V			Case number (if known)	
	17.1.	Checking and Savings	SECU		\$200.00
	17.2.	Checking	SECU		\$50.00
18. Bonds Exam	s, mutual funds, or publi ples: Bond funds, investm	cly traded stocks ent accounts with broke	erage firms, money market acc	counts	
		Institution or issuer na	me:		
joint	ublicly traded stock and venture	l interests in incorpora	ated and unincorporated bus	sinesses, including an interest in	an LLC, partnership, and
■ No	Cive enecific information	a about them			
⊔ Yes.	Give specific information Na	n about them nme of entity:		% of ownership:	
Nego	tiable instruments include	personal checks, cashie	able and non-negotiable instems' checks, promissory notes, fer to someone by signing or o	, and money orders.	
	Give specific information	about them			
Exam ■ No	ment or pension accoun ples: Interests in IRA, ERI List each account separa	ISA, Keogh, 401(k), 403	B(b), thrift savings accounts, or Institution name:	r other pension or profit-sharing pla	ns
Your		its you have made so th	nat you may continue service of blic utilities (electric, gas, wate	or use from a company er), telecommunications companies	, or others
_			Institution name or individ	dual:	
23. Annui ■ No	ties (A contract for a perio	odic payment of money t	to you, either for life or for a nu	umber of years)	
_	lssuer nan	ne and description.			
	ts in an education IRA, i .C. §§ 530(b)(1), 529A(b),		lified ABLE program, or und	der a qualified state tuition progra	am.
	Institution	name and description.	Separately file the records of a	any interests.11 U.S.C. § 521(c):	
25. Trusts ■ No	s, equitable or future inte	erests in property (other	er than anything listed in lin	e 1), and rights or powers exerci	sable for your benefit
☐ Yes.	Give specific information	about them			
			other intellectual property from royalties and licensing a	agreements	
	Give specific information	about them			
<i>Exam</i> ■ No	ses, franchises, and other ples: Building permits, exc	clusive licenses, cooper	ative association holdings, liqu	uor licenses, professional licenses	
					Ourmant value of the
woney or	property owed to you?				Current value of the portion you own? Do not deduct secured

	btor 1 btor 2	Shawn Kelvin Whitaker Tonja Richardson Whit	aker	Case number (if known)	
					claims or exemptions.
	Tax refo	unds owed to you			
[□ Yes. (Give specific information abou	t them, including whether you already	filed the returns and the tax years	
		support bles: Past due or lump sum ali	nony, spousal support, child support, n	naintenance, divorce settlement, property se	ettlement
		Give specific information			
	Examp _	imounts someone owes you ples: Unpaid wages, disability benefits; unpaid loans yo	nsurance payments, disability benefits,	sick pay, vacation pay, workers' compensa	ation, Social Security
_	■ No □ Yes.	Give specific information			
	Examp	ts in insurance policies ples: Health, disability, or life in	surance; health savings account (HSA); credit, homeowner's, or renter's insurance	2
_	No				
L	⊔ Yes. I		of each policy and list its value. ny name:	Beneficiary:	Surrender or refund value:
32.	If you a		you from someone who has died rust, expect proceeds from a life insura	nce policy, or are currently entitled to receiv	e property because
_	■ No □ Yes.	Give specific information			
_			er or not you have filed a lawsuit or isputes, insurance claims, or rights to s		
	_	Describe each claim			
[□ No		claims of every nature, including co	unterclaims of the debtor and rights to s	et off claims
	Yes.	Describe each claim			
			Possible Consumer Rights Cla Subject to approval of settlem Court.		
				o specific claims are known at	\$0.00
_	_	ancial assets you did not al	ready list		
	■ No □ Yes.	Give specific information			
36.		-	entries from Part 4, including any e		\$375.00
Par	t 5: Des	scribe Any Business-Related Pr	operty You Own or Have an Interest In. Li	st any real estate in Part 1.	
_	_ ′	own or have any legal or equitate to Part 6.	le interest in any business-related prope	rty?	
	Yes. G	so to line 38.			

Current value of the

Debtor 1 Debtor 2	Tonja Richa	ın wnıtaker rdson Whitaker		Case number (if known)	
					portion you own? Do not deduct secured claims or exemptions.
38. Acco u	ınts receivable o	or commissions you alro	eady earned		
■ No					
☐ Yes.	Describe				
Exam ■ No		nishings, and supplies elated computers, softwar	re, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, (chairs, electronic devices
40. Machi □ No	nery, fixtures, ec	quipment, supplies you	ı use in business, and tools of your	r trade	
Yes.	Describe				
		Tools of Trade			\$500.00
41. Invent ■ No □ Yes.	ory Describe				
42. Intere : ■ No	sts in partnershi	ps or joint ventures			
☐ Yes.	Give specific inf	formation about them Name of entity:		% of ownership:	
43. Custo ■ _{No.}	mer lists, mailin	g lists, or other compile	ations		
☐ Do yo	our lists include pe	rsonally identifiable inforn	nation (as defined in 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe	9			
■ No	usiness-related	property you did not all	ready list		
			om Part 5, including any entries for	r pages you have attached	\$500.00
		and Commercial Fishing-Finterest in farmland, list it in	Related Property You Own or Have an In Part 1.	nterest In.	
	u own or have and . Go to Part 7.	ny legal or equitable int	terest in any farm- or commercial f	ishing-related property?	
☐ Ye	s. Go to line 47.				
Part 7:	Describe All Pro	operty You Own or Have a	n Interest in That You Did Not List Abov	/e	

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Debt Debt				Case number (if known)	
	To you have other property of any kind you did not alread Examples: Season tickets, country club membership No Yes. Give specific information	y list?			
	.IMPORTANT NOTICES:				
	(1) Valuation Method (Sch.	A & B):	FMV unless oth	nerwise noted.	
	(2) Creditor claims disclose drawn largely from unverified and shall not be considered amount owed, interest, late or representatives an admit actual owners of such claim	ied info d an ad te fees, ission b	rmation provide mission by the etc. Nor is this	d by the creditor, Debtor(s) of the listing of a creditor	\$0.00
					. 1
54.	Add the dollar value of all of your entries from Part 7. Wr	ite that r	number here		\$0.00
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$80,000.00
56.	Part 2: Total vehicles, line 5		\$9,860.00	_	
57.	Part 3: Total personal and household items, line 15		\$1,230.00		
58.	Part 4: Total financial assets, line 36		\$375.00		
59.	Part 5: Total business-related property, line 45		\$500.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$11,965.00	Copy personal property total	\$11,965.00
63.	Total of all property on Schedule A/B. Add line 55 + line 6.	2			\$91,965.00

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)

IN THE MATTER OF: Shawn Kelvin Whitaker Tonja Richardson Whitaker Debtor(s). CASE NUMBER:

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Shawn Kelvin Whitaker and Tonja Richardson Whitaker</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: **(Attach additional sheets if necessary)**.

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
14891 NC HWY 43 Whitakers, NC 27891 Nash County	80,000.00 minus 6% \$75,200.00	_	Select Portfolio Servicing	63,191.00	12,009.00	60,000.00

Debtor's Age:	
Name of former co-owner:	

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 60,000.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2003 Chevrolet Silverado 106,257 miles	4,660.00	J	Wells Fargo Dealer Services	8,318.00	0.00	3,500.00
2008 GMC Light Duty Acadia 188,941 miles	5,200.00	J	American Credit Acceptance	9,927.00	0.00	3,500.00

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 7,000.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 1.

Description of Property	Market	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Electronics	200.00	J			200.00	200.00
Household Goods	510.00	J			510.00	510.00
Jewelry	120.00	J			120.00	120.00
Wearing Apparel	400.00	J			400.00	400.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 1,230.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>		Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
Tools of Trade	500.00	D2			500.00	2,000.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 2,000.0

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Any property owned by the debtor not otherwise claimed as exempt					9,625.00	9,625.00
Cash	125.00	J			125.00	125.00
Checking and Savings: SECU	200.00	J			200.00	200.00
Checking: SECU	50.00	D2			50.00	50.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 10,000.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number
-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

 $\underline{\textbf{College Savings Plan}} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Value} \\ \textbf{Initials of Child Beneficiary} \\ \textbf{College Savings Plan} \\ \textbf{College Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Savings Plan} \\ \textbf{College Plan} \\ \textbf{Col$

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL
UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or
governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number -NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

vpe of Support\Amount\Location of Funds	
ype of Supportivamounts. Cocation of Funds	
NONE-	
NONL-	

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	of Lien	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14 NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-	
15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
-NONE-	
16. FEDERAL PENSION FUND EXEMPTIONS	
-NONE-	

- OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW
- -NONE-
 - 18. RECENT PURCHASES
 - (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Amount of Lien	Net <u>Value</u>
-NONE-			

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt			

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net <u>Value</u>
-NONE-					

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Shawn Kelvin Whitaker and Tonja Richardson Whitaker</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: September 25, 2018	/s/ Shawn Kelvin Whitaker	
	Shawn Kelvin Whitaker	_
	Debtor	
	/s/ Tonja Richardson Whitaker	
	Tonja Richardson Whitaker	
	Debtor 2	

Filli	in this inform	ation to identify you	r case:				
Deb	tor 1	Shawn Kelvin W	/hitaker				
		First Name	Middle Name	Last Name			
Deb	tor 2	Tonja Richardso	on Whitaker				
(Spou	use if, filing)	First Name	Middle Name	Last Name	_		
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NOR EXEMPTIONS)	TH CAROLIN	IA (NC		
Case	e number						
(if kno						☐ Check	if this is an
						amend	led filing
~ ···	–	4000					
	cial Form						
Sc	hedule l	D: Creditors	Who Have Claims S	Secure	d by Propert	y	12/15
s nee			f two married people are filing togetheout, number the entries, and attach it t				
	,	nave claims secured by	your property?				
		•	nis form to the court with your other	schedules. Y	ou have nothing else to	o report on this form	
	_	all of the information b	•	ooricaalco. 1	ou have nothing clock	o report on this form.	
			Delow.				
Part	List All	Secured Claims			Column A	Column B	Column C
			nore than one secured claim, list the cred a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
			cal order according to the creditor's name		Do not deduct the	that supports this	portion
	American	Cradit			value of collateral.	claim	If any
2.1	Acceptance		Describe the property that secures the	he claim:	\$9,927.00	\$5,200.00	\$4,727.00
	Creditor's Name	<u>-</u>	2008 GMC Light Duty Acadia	1			
	Attn: Office	er	188,941 miles				
	340 East M	lain Street,	As of the date you file, the claim is: (Check all that			
	Suite 400	** CC 20202	apply.	Shook all that			
		rg, SC 29302	Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
Who	owes the dek	ot? Check one.	☐ Disputed Nature of lien. Check all that apply.				
	ebtor 1 only		☐ An agreement you made (such as n	nortgage or se	cured		
	ebtor 2 only		car loan)				
	ebtor 1 and Del	otor 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
ΠА	t least one of the	e debtors and another	☐ Judgment lien from a lawsuit				
	heck if this cla		Other (including a right to offset)	Purchase I	Money Security Into	erest	
Date	debt was incu	rred <u>2016</u>	Last 4 digits of account numb	oer			
2.2	GFS/Kay J	owolore	Describe the property that secures the	he claim:	\$544.00	\$544.00	\$0.00
2.2	Creditor's Name	ewelel 5	Jewelery	ne ciann.	φ544.00	Ψ344.00	Ψ0.00
			ocureicity .				
			As of the data you file the plain is:	Dis I II 4h - 4			
	P.O. Box 4		As of the date you file, the claim is: (apply.	oneck all that			
	Beaverton	, OR 97076	☐ Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
\A/b a	owee the deb	12 Charle and	Disputed				
_ `	owes the dek	nr Check one.	Nature of lien. Check all that apply.		aad		
_	ebtor 1 only			ποπgage or se	curea		
_	ebtor 2 only		_				
	ebtor 1 and Deb	otor 2 only e debtors and another	Statutory lien (such as tax lien, med	nanic's lien)			
_			Judgment lien from a lawsuit	Merchandi	se Purchase		
☐ Check if this claim relates to a community debt			Other (including a right to offset)	onana			

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Debtor 1 Shawn Kelvin Whitaker		Case number (if known)		
First Name Middle N				
Debtor 2 Tonja Richardson White				
Date debt was incurred 2018	Last 4 digits of account number			
2.3 Nash County Tax Dept.	Describe the property that secures the claim:	\$0.00	\$80,000.00	\$0.00
Creditor's Name	14891 NC HWY 43 Whitakers, NC			•
120 West Washington	27891 Nash County			
Street	As of the date you file, the claim is: Check all that	l		
Suite 2058 Nashville, NC 27856	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street, City, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured		
☐ Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Real Pr	operty Taxes - Included I	n Escrow	
Date debt was incurred 2018	Last 4 digits of account number			
2.4 Select Portfolio Servicing	Describe the property that secures the claim:	\$63,191.00	\$80,000.00	\$0.00
Creditor's Name	14891 NC HWY 43 Whitakers, NC		Ψου,ουσ.ου	ψ0.00
Attn: Managing Agent	27891 Nash County			
3815 South West Temple	As of the date you file, the claim is: Check all that	nt ·		
Street Salt Lake City, UT	apply.	ıı		
84115-4412	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage of	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and another	Judgment lien from a lawsuit	al		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ai		
Date debt was incurred 2006	Last 4 digits of account number			
Wells Fargo Dealer				<u> </u>
Services	Describe the property that secures the claim:	\$8,318.00	\$4,660.00	\$3,658.00
Creditor's Name	2003 Chevrolet Silverado 106,257 miles			
Attn: Managing Agent				
Post Office Box 19657	As of the date you file, the claim is: Check all that apply.	at .		
Irvine, CA 92623	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured		
Debtor 2 only	car loan)	5504104		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	9	se Money Security Interes	st	

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Debtor 1 Shawn Kelvin Whitaker				Case number (if known)		
	First Name	Middle Name	Last Name			
Debtor	2 Tonja Rich	nardson Whitaker				
	First Name	Middle Name	Last Name			
Date del	ot was incurred	2017	Last 4 digits of account number			
Add th	e dollar value of	vour entries in Column	A on this page. Write that number he	nere: \$81,980.00		
		•	llar value totals from all pages.	· · · · · · · · · · · · · · · · · · ·		
	hat number here		ilai value totais iroili ali pages.	\$81,980.00		
	_					
Part 2:	List Others to	o Be Notified for a De	ebt That You Already Listed			
trying to	collect from you creditor for any	u for a debt you owe to	someone else, list the creditor in Part sted in Part 1, list the additional credi	ot that you already listed in Part 1. For example, if a collection agency is rt 1, and then list the collection agency here. Similarly, if you have more ditors here. If you do not have additional persons to be notified for any		
\square	ame, Number, St	reet, City, State & Zip Coo	de	On which line in Part 1 did you enter the creditor? 2.1		
		dit Acceptance		,		
-	ost Office Bo			Last 4 digits of account number		
G	Greenville, SC	29608-3628				
П						
	ame, Number, St	reet, City, State & Zip Coo	de	On which line in Part 1 did you enter the creditor? 2.5		
		ealer Services		,		
_	ttn: Officer			Last 4 digits of account number		
F	ost Office Bo	ox 168048				
li	ving, TX 750	16-8048				

							_		
Fill in this inform	mation to identify your	case:							
Debtor 1	Shawn Kelvin Wh	itaker							
20210	First Name	Middle Na	ame	Last Nam	ie				
Debtor 2	Tonja Richardson	Whitaker							
(Spouse if, filing)	First Name	Middle Na	ime	Last Nam	е				
United States Ba	inkruptcy Court for the:	EASTERN DE EXEMPTION	DISTRICT OF N NS)	NORTH CAR	OLINA (NC				
Casa numbar									
Case number _ (if known)			-					k if this is a	ın
O#: -: -! F	- 400E/E						_		
Official Forn		U 11		l Ol-:	_			40/4	_
	F: Creditors W							12/1	
Schedule D: Credit left. Attach the Cor name and case nui	ntory Contracts and Unexpi ors Who Have Claims Sect tinuation Page to this pag mber (if known). II of Your PRIORITY Un	ured by Proper e. If you have n	ty. If more space no information to	e is needed, co	ppy the Part	you need, fill it out	, number the entries	in the boxes	s on the
	ors have priority unsecured								
□ No. Go to F	• •	a ciainis agains	it you:						
Yes.	uit 2.								
identify what ty possible, list th Part 1. If more	r priority unsecured claims pe of claim it is. If a claim ha e claims in alphabetical orde than one creditor holds a pa ation of each type of claim, s	s both priority and a coording to the rticular claim, lis	nd nonpriority am ne creditor's name at the other credite	nounts, list that e. If you have r ors in Part 3.	claim here ar nore than two	nd show both priority	and nonpriority amou	nts. As much	h as ge of
2.1 The Lav	w Offices of John T.	Orcutt La	st 4 digits of ac	count number		\$4,750.00	amount 3 \$4,750.00	amount	\$0.00
	editor's Name	<u> </u>	or 4 digits of do	oount number		Ψ+,7 30.00	σ φτ,700.00	<u> </u>	Ψ0.00
Raleigh	03 Six Forks Road n, NC 27615		hen was the deb		2018		_		
	Street City State Zlp Code d the debt? Check one.		s of the date you	ı file, the claim	is: Check al	I that apply			
_			Contingent						
Debtor 1 o	•		Unliquidated						
Debtor 2 o	only		Disputed						
■ Debtor 1 a	and Debtor 2 only	Ту	pe of PRIORITY	unsecured cl	aim:				
☐ At least or	ne of the debtors and anothe	,	Domestic suppo	ort obligations					
☐ Check if t	this claim is for a commun	nity debt	Taxes and certa	ain other debts	you owe the	government			
	subject to offset?		Claims for death	h or personal in	jury while yo	u were intoxicated			
■ No	•		Other. Specify	Administr	ative Exp	enses			
☐ Yes				Legal Fee				_	
B ()	" () NONDON								
-	II of Your NONPRIORIT								
	ors have nonpriority unsec	_							
■ Yes.	ve nothing to report in this pa	art. Submit this f	orm to the court v	with your other	schedules.				
unsecured clai	r nonpriority unsecured cla m, list the creditor separately tor holds a particular claim, li	for each claim.	For each claim li	isted, identify w	hat type of cl	aim it is. Do not list o	claims already included	d in Part 1. If	f more

Total claim

tor 2 Tonja Richardson Whitaker	Case number (if known)	
Absolute Collection Service	Last 4 digits of account number	\$824.00
Nonpriority Creditor's Name 421 Fayetteville Street Mall Suite 600	When was the debt incurred? 2017	
Raleigh, NC 27601 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	
Badcock	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 1473 Wesleyan Blvd	When was the debt incurred? 2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Possible Obligation	
Centra Credit Union	Last 4 digits of account number	\$247.00
Nonpriority Creditor's Name Post Office Box 31112	When was the debt incurred? 2011	
Tampa, FL 33631-3112 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
<u> </u>	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		
⊔ res	Other. Specify Personal Loan	

Debto Debto	r 1 Shawn Kelvin Whitaker r 2 Tonja Richardson Whitaker	Case number (if known)	
4.4	CenturyLink	Last 4 digits of account number	\$418.00
	Nonpriority Creditor's Name Post Office Box 4300 Carol Stream, IL 60197-4300	When was the debt incurred? 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	
4.5	Finance America Nonpriority Creditor's Name	Last 4 digits of account number	\$1,716.00
	Post Office Box 270100 Louisville, CO 80027	When was the debt incurred? 2016	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Personal Loan	
4.6	GEICO	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	Post Office Box 23356 Pittsburgh, PA 15222-3356	When was the debt incurred? 2016	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	

Debto Debto	r 1 Shawn Kelvin Whitaker r 2 Tonja Richardson Whitaker	Case number (if known)	
4.7	Jefferson Capital Systems, LLC	Last 4 digits of account number	\$111.79
	Nonpriority Creditor's Name Post Office Box 772813 Chicago, IL 60677-2813	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.8	Mariner Finance	Last 4 digits of account number	\$552.00
	Nonpriority Creditor's Name 1364 Benvenue Road Rocky Mount, NC 27804	When was the debt incurred? 2010	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	
4.9	Midland Funding LLC	Last 4 digits of account number	\$179.50
	Nonpriority Creditor's Name 16 Mcleland Rd Suite 101	When was the debt incurred? 2017	
	Saint Cloud, MN 56303 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify Collection Account	
	: 	— Outer, Openity	

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Nuvell Credit Corp	Last 4 digits of account number	\$10,519.86
Nonpriority Creditor's Name Attn: Managing Agent Post Office Box 380901 Bloomington, MN 55438-0901	When was the debt incurred? 2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Repossession Deficiency	
Professional Credit Solutions, LLC	Last 4 digits of account number	\$3,588.0
Nonpriority Creditor's Name Post Office Box 2625 Chesterfield, VA 23832	When was the debt incurred? 2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Bills *Multiple Accounts*	
RJM Acquisitions Funding, LLC	Last 4 digits of account number	\$39.9
Nonpriority Creditor's Name PO Box 29622 Raleigh, NC 27626	When was the debt incurred? 2017	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Collection Account	

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Southern Credit Adjusters	Last 4 digits of account number	\$377.00
Nonpriority Creditor's Name Post Office Box 2764	When was the debt incurred? 2018	
Rocky Mount, NC 27801-2764 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	
Sprint	Last 4 digits of account number	\$46.00
Nonpriority Creditor's Name Post Office Box 629023 El Dorado Hills, CA 95762	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collection Account	
TD Bank USA/Target Nonpriority Creditor's Name	Last 4 digits of account number	\$91.02
3701 Wayzata Boulevard Minneapolis, MN 55416	When was the debt incurred? 2017	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Returned Check	

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Solution	Debtor 2	Shawn Kelvin Whitaker Tonja Richardson Whitaker		Case number (if known)	
As of the date your file, the claim is: Check all that apply		UNC Healthcare	Last 4 digits of account number	er	\$1,000.00
As of the date you file, the claim is: Check all that apply Debtor 2 only		200 Eastowne Drive	When was the debt incurred?	2016	-
Who incurred the debt? Check one. Contingent Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 on			As of the date you file, the clai	m is: Check all that apply	
Debtor 2 only			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
Debtor 2 only		Debtor 1 only	☐ Contingent		
Debtor 1 and Debtor 2 only Check one		☐ Debtor 2 only			
Student loans Student loan		■ Debtor 1 and Debtor 2 only	<u> </u>		
Obligations arising out of a separation agreement or divorce that you did not report as priority claims		☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
Is the claim subject to offset? No		☐ Check if this claim is for a community	☐ Student loans		
US Dept of Education/Great Lakes Ed Norpriority Creditor's Name Post Office Box 7860 Madison, WI 53704 Number Street City State 2ip Code Who incurred the debt? Check one.		debt		eparation agreement or divorce that you did not	
Section Sect		■ No	☐ Debts to pension or profit-sha	aring plans, and other similar debts	
Ed Name and Address Name Sa,819.00 Sa,819.00 Name Post Office Box 7860 Name Post 75 Name		Yes	Other. Specify Medical E	Bills	-
Nonpriority Creditor's Name Post Office Box 7860 Macison, WI 53704 Number Street (in) State 2/p Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated	l I				\$8 810 0 0
Post Office Box 7860 Madison, WI 537074 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	l I		Last 4 digits of account number	er	Ψο,ο 19.00
Who incurred the debt? Check one. Debtor 1 only Contingent		Post Office Box 7860	When was the debt incurred?	2017	-
Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 loans Debtor 4 only Debtor 4 loans Debtor 5 only Debtor 5 only Debtor 6 loans Debtor 7 loans Debtor 6 loa			As of the date you file, the clai	m is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Student Loans Debts to pension or profit-sharing plans, and other similar debts Student Loans Student Loans Part 3: List Others to Be Notified About a Debt That You Already Listed Student Loans Student Loans Part 3: List Others to Be Notified About a Debt That You Already Listed Student Loans Part 3: List Others to Be Notified About a Debt That You Already Listed Student Loans Part 3: List Others to Be Notified About a Debt That You Already Listed Suse this page only if you have others to be notified about your bankruptcy, for a debt you over to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you list the original creditor? Line 4.7 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name and Address Northic Box 348991 Minneapolis, MN 55438-0901		_			
Debtor 1 and Debtor 2 only		_	_		
At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim is for a community debt Is the claim subject to offset? Student loans Check if this claim is for a community debt Is the claim subject to offset? Student loans Check if this claim subject to offset? Check or Check if this claim is for a community Check Is the claim subject to offset? Check or Check		■ Debtor 2 only	·		
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obets to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	•	and alaim.	
Check in this claim is for a community debt Check one): Debts to pension or profit-sharing plans, and other similar debts Part 1: Creditors with Priority Unsecured Claims		At least one of the debtors and another	_	red claim:	
Is the claim subject to offset? Pobe Debts to pension or profit-sharing plans, and other similar debts Ves Debts to pension or profit-sharing plans, and other similar debts Student Loans					
Student Loans Student Loans Student Loans		Is the claim subject to offset?	report as priority claims		
Student Loans			<u> </u>	aring plans, and other similar debts	
List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address Jefferson Capital Systems, LLC Post Office Box 7999 Saint Cloud, MN 56302-9617 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims On which entry in Part 1 or Part 2 did you list the ori		∐ Yes			-
5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address Jefferson Capital Systems, LLC Post Office Box 7999 Saint Cloud, MN 56302-9617 Name and Address Mariner Finance Post Office Box 44490 Baltimore, MD 21236-4490 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims All digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims On which		_		Loans	
is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address Jefferson Capital Systems, LLC Post Office Box 7999 Saint Cloud, MN 56302-9617 On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims	Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
Jefferson Capital Systems, LLC Post Office Box 7999 Saint Cloud, MN 56302-9617 Last 4 digits of account number Name and Address Mariner Finance Post Office Box 44490 Baltimore, MD 21236-4490 Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims	is tryin have m	g to collect from you for a debt you owe to s nore than one creditor for any of the debts th	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac	r in Parts 1 or 2, then list the collection agency	y here. Similarly, if you
Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims	Name an	d Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims			Line 4.7 of (Check one):		
Name and Address Mariner Finance Post Office Box 44490 Baltimore, MD 21236-4490 Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number				Part 2: Creditors with Nonpriority Unsecured	Claims
Mariner Finance Post Office Box 44490 Baltimore, MD 21236-4490 Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address Sprint Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims	- Canic C	710uu, MIN 30002 3017	Last 4 digits of account number		
Post Office Box 44490 Baltimore, MD 21236-4490 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims				_	
Baltimore, MD 21236-4490 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims			Line 4.8 of (Check one):	•	
Name and Address Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Sprint On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims				■ Part 2: Creditors with Nonpriority Unsecured	Claims
Nuvell Financial Services Corp. Post Office Box 380901 Minneapolis, MN 55438-0901 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Sprint Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims			Last 4 digits of account number		
Post Office Box 380901 Minneapolis, MN 55438-0901 Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Sprint On Which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one):	Name an	d Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Minneapolis, MN 55438-0901 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Sprint On Which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims		=	Line 4.10 of (<i>Check one</i>):	•	
Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sprint Line 4.14 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims				■ Part 2: Creditors with Nonpriority Unsecured	Claims
Sprint Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims			Last 4 digits of account number		
Sprint Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims	Name an	d Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Attn Bankruptcy Dept ■ Part 2: Creditors with Nonpriority Unsecured Claims	Sprint			_	ims
	Attn B	ankruptcy Dept		■ Part 2: Creditors with Nonpriority Unsecured	Claims

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Debtor 1	Shawn Kelvin Whitaker		
Debtor 2	Tonja Richardson Whitaker	Case number (if known)	
		-	

6200 Sprint Parkway Overland Park, KS 66251

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	4,750.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	4,750.00
					Total Claim
	6f.	Student loans	6f.	\$	8,819.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	20,210.13
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	29,029.13

Fill in this infor	mation to identify your	case:		
Debtor 1	Shawn Kelvin Wh	nitaker		
	First Name	Middle Name	Last Name	
Debtor 2	Tonja Richardsoi	n Whitaker		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	PF NORTH CAROLINA (NC	
Case number				
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Rent a Center 953 N Wesleyan Blvd. Rocky Mount, NC 27804	Rent to Own Refrigerator Beginning: 2/18 Lessee
2.2	RTO National PO BOX 9759 Greenville, SC 29604	Rent to Own Outdoor Storage Building Beginning: 5/3/18 Lessee
2.3	US Cellular 4700 South Garnett Road Tulsa, OK 74146-5299	Cellular Contract

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Fill in this in	formation to identify your	case:			
Debtor 1	Shawn Kelvin Wh	nitaker			
	First Name	Middle Name	Last Name	_	
Debtor 2	Tonja Richardson				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT (EXEMPTIONS)	OF NORTH CAROLINA ((NC	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official E	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
our name an	nd case number (if known) u have any codebtors? (If	. Answer every question	n.	. •	p of any Additional Pages, write
=					
■ No □ Yes					
⊔ Yes					
	the last 8 years, have you California, Idaho, Louisiana				ty states and territories include
■ No. Go	to line 3.				
☐ Yes. D	id your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guarai	ntor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
Col	lumn 1: Your codebtor			Column 2: The cr	editor to whom you owe the debt
	ie, Number, Street, City, State and Z	IP Code		Check all schedule	•
2.4				Cabadula D lia	_
3.1 Nan	ne			☐ Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule E,F,	
				— Scriedule O, III	
Nun City		State	ZIP Code		
Oity		Cidio	211 0000		
3.2 Nan	ne			Schedule D, lir	
, ven	· ·			☐ Schedule E/F,	
				☐ Schedule G, lir	ıe
Nun City		State	ZIP Code		
Oity		- 1010	2.7 0000		

Fill in this informat	tion to identify your case:	
Debtor 1	Shawn Kelvin Whitaker	
Debtor 2 (Spouse, if filing)	Tonja Richardson Whitaker	
United States Ban	nkruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY

Oniciai Forni Tubi

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed If you have more than one job, Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Maintenance** Self Employed Include part-time, seasonal, or **Rocky Mount Housing** self-employed work. **Unity Hair Salon Employer's name Authority** Occupation may include student or homemaker, if it applies. **Employer's address** 1006 Aycock Street 115-B Nashville Drive Rocky Mount, NC 27803 Nashville, NC 27856 How long employed there? 9 Months 5 Years

Give Details About Monthly Income

Calculate gross Income. Add line 2 + line 3.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3.

		For Debtor 1		ebtor 2 or ing spouse
2.	\$	2,364.83	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	2,364.83	\$	0.00

Schedule I: Your Income Official Form 106I page 1

	otor 1 otor 2	Shawn Kelvin Whitaker Tonja Richardson Whitaker			Case	number (if k	nown)				
	Con	vy line 4 hore	4.		For	Debtor 1	4 92		Debtor i-filing s	pouse	
	Cop	y line 4 here	4.		Φ_	2,36	4.83	Φ_		0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	23	4.13	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$_		0.00	\$		0.00)
	5c.	Voluntary contributions for retirement plans	50		\$_	(0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$_		0.00	_
	5e.	Insurance	56		\$_		0.00	\$_		0.00	
	5f.	Domestic support obligations	5f		\$_ \$		0.00	\$_		0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	5g	კ. Դ.+	\$ \$		0.00	+ \$_		0.00	_
_	_				· -			· —			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _		4.13	\$_		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	2,13	0.70	\$_		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$		0.00	\$	1	154.67	,
	8b.	Interest and dividends	8b		\$ -		0.00	\$-	١,	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a depending regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		0.00	\$		0.00	_
	8d.	Unemployment compensation	80	d.	\$_		0.00	\$		0.00)
	8e.	Social Security	86	Э.	\$		0.00	\$		0.00)
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f	·.	\$_		0.00	\$_		0.00	<u>)</u>
	8g.	Pension or retirement income	80		\$_		0.00	\$_		0.00	_
	8h.	Other monthly income. Specify: Fed/State Overwithholding	8r	Դ.+	\$_	57	0.00	+ \$_		0.00	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	57	0.00	\$_	1	,154.6	57
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,700.70	+ s	1 1	154.67	= \$	3,855.37
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.			2,700.70	- '	•,	104.01	_	0,000.01
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are reconstructed.	our dep			•			Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Ceies							. 12.	\$	3,855.37
											ly income
13.		you expect an increase or decrease within the year after you file this fo	orm?								
		Yes. Explain: None									

Official Form 106I Schedule I: Your Income page 2

Fill in th	nis informa	ation to identify you	ur case:						
Debtor 1		Shawn Kelvir		ker		Ch	eck i	f this is:	
Debtor 2	2 e, if filing)	Tonja Richard	dson W	hitaker			As		ring postpetition chapter he following date:
United S	States Bank	ruptcy Court for the:		RN DISTRICT OF NORTH	I CAROLINA		MN	M / DD / YYYY	
Case nu (If knowr									
Offic	cial Fo	orm 106J							
Sch	edule	J: Your E	Exper	nses					12/1
Part 1: 1. Is	Desc this a joi l No. Go to Yes. Doo	ribe Your Housel nt case? o line 2. es Debtor 2 live in	y question nold						our name and case
Do	•	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?
	o not state				Son (In School)	_ _ _	18	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
ex	cpenses c	penses include of people other th d your dependen	an _—	l No l Yes					☐ Yes
expens	te your e	a date after the b	ur bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a supp					
the val		h assistance and		government assistance i cluded it on <i>Schedule I:</i> \				Your expe	enses
		or home ownersh nd any rent for the		nses for your residence. I or lot.	nclude first mortgage	4.	\$_		0.00
lf	not inclu	ded in line 4:							
4a		estate taxes	or non-to-	r'a inqurance		4a.	. –		0.00
4b 4c	-	erty, homeowner's, e maintenance, rep				4b. 4c.	. –		30.00 100.00
40		owner's association				4d.	ψ –		0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Cabilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, internet, satellite, and cable services 6d. Other. Specify: Cell Phone Cable Internet Food and housekeeping supplies Childcare and children's education costs Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. \$ Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. The statistic of the state of t	known)
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cell Phone Cable Internet Food and housekeeping supplies Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses 110. \$ Medical and dental expenses 111. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15b. Wehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Straxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15x. Life insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$ 15a. \$ 15b. \$ 15c. Specify: 15d. \$ 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15p. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Rent A Center 17d. Other. Specify: Rent A Center 17d. Other. Specify: Rent A Center 17d. Other payments on the property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's on tincluded in lines 4 or 5 of this form or on Schedule I: Your Roam (Official Form 106i). Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: You food the payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Sched	
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cell Phone Cable Internet Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: RTO Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. Other payments on ther property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20c. Homeowner's association or condominium dues 20c. Property, homeowner's or renter's insurance 20c. Sheries insurance 20c. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I.	300.00
6d. Other. Specify: Cell Phone Cable Internet Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurances. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Other insurance. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: Rent A Center 17d. Other. Specify: Rent A Center 17d. Other. Specify: Rent A Center 17d. Other payments you make to support others who do not live with you. Specify: 10ther payments you make to support others who do not live with you. Specify: 10ther payments you make to support others who do not live with you. Specify: 10ther real property expenses not included in lines 4 or 5 of this form or on Schedule L: Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: 10ther real property expenses not included in lines 4 or 5 of this form or on Schedule L: Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule L: Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule L: Your Income (Official Form 106i). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule L: Your Income (Official Form 106i). Other	0.00
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Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Life insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: RTO 17d. Other ayments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real prope	43.00
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Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: Rent A Center 17d. Other. Specify: RTO Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments on wake to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Specify: Other real property expenses not inclu	500.00
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Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16c. \$ 17a. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Supports, homeowner's association or condominium dues 20e. \$ 20ther: Specify: Emergency/Miscellaneous 21. +\$ Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	110.00
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Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. \$ 15d.	139.25
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Staxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Cother real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Cother real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Cother real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Cother real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income (Official Form 1061). Cother real property expenses not included in lines 4 or 5 of this form o	0.00
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22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	3,855.37
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23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	3,855.37
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	
	3,855.37
	3,855.37
	<u> </u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. \$	0.00
, ,	
Do you expect an increase or decrease in your expenses within the year after you file this form For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payme modification to the terms of your mortgage?	
■ No.	
☐ Yes. Explain here: None	

	O 430 10	00010 0 DWW D001 1 Hed 10/12/10 Entered 10/12/10 10.40.41		igo 40	70100
Fill	l in this informa	ation to identify your case:			
De	btor 1	Shawn Kelvin Whitaker			
_		First Name Middle Name Last Name			
	btor 2 ouse if, filing)	Tonja Richardson Whitaker First Name Middle Name Last Name			
(
Un	ited States Banl	EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)			
	se number				
(if kı	nown)		_	heck if th mended f	
		<u>m 106Sum</u>			
		Your Assets and Liabilities and Certain Statistical Information		12/1	-
info	rmation. Fill o	nd accurate as possible. If two married people are filing together, both are equally responsible fut all of your schedules first; then complete the information on this form. If you are filing amends, you must fill out a new Summary and check the box at the top of this page.			
Pa	rt 1: Summa	rize Your Assets			
				ur assets lue of wh	s at you own
1.	Schedule A/I	B: Property (Official Form 106A/B)			
	1a. Copy line	55, Total real estate, from Schedule A/B	\$_		80,000.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$ _		11,965.00
	1c. Copy line	63, Total of all property on Schedule A/B	\$		91,965.00
Pa	rt 2: Summa	rize Your Liabilities			
			Va	liabili	ti
				ur liabilit ount you	
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$		81,980.00
3.		F: Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$		4,750.00
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$		29,029.13
		Your total liabilities	\$	1	115,759.13
Pa	rt 3: Summa	rize Your Income and Expenses			
4.		Your Income (Official Form 106I) mbined monthly income from line 12 of Schedule I	\$		3,855.37
5.		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	\$		3,855.37
Pa	rt 4: Answer	These Questions for Administrative and Statistical Records			
6.	•	g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with yo	our othe	r schedu	les.
7.	Yes What kind of	debt do you have?			
		ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for bld purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a perso	onal, fam	ily, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information
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	Shawn Kelvin Whitaker		
Debtor 2	Tonja Richardson Whitaker	Case number (if known)	
	the court with your other schedules.		

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	8,819.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	8,819.00

Fill in this inform	nation to identify your	case:				
Debtor 1	Shawn Kelvin Wh	itaker				
	First Name	Middle Name	Last Name			
Debtor 2	Tonja Richardson	Whitaker				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT EXEMPTIONS)	OF NORTH CAROLINA (N	IC		
Case number						
(if known)						Check if this is an mended filing
	ion About a		al Debtor's So			12/15
If two married peo	ople are filing together	, both are equally resp	consible for supplying cor	rect information.		
obtaining money		connection with a ba	les or amended schedules inkruptcy case can result i			
Sign	Below					
Did you pay	or agree to pay some	one who is NOT an att	orney to help you fill out b	bankruptcy forms?		
■ No						
☐ Yes. Na	ame of person					ion Preparer's Notice, ure (Official Form 119)
•	ty of perjury, I declare true and correct.	that I have read the su	ımmary and schedules file	ed with this declarati	on and	

X /s/ Tonja Richardson Whitaker

Tonja Richardson Whitaker

Signature of Debtor 2

Date **October 12, 2018**

X /s/ Shawn Kelvin Whitaker

Shawn Kelvin Whitaker

Date **October 12, 2018**

Signature of Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

In r		Shawn Kelvin Tonia Richard	ı Whitaker dson Whitaker		Case No.	
	_	. o.i.ja i tiloitai e		Debtor(s)	Chapter	13
		DIS	SCLOSURE OF COM	PENSATION OF ATT	ORNEY FOR DI	EBTOR(S)
1.	comp	pensation paid to	o me within one year before the	2016(b), I certify that I am the att filing of the petition in bankrupt ion of or in connection with the	cy, or agreed to be paid	to me, for services rendered or to
		For legal servic	es, I have agreed to accept		\$	4,950.00
		Prior to the filir	ng of this statement I have receive	ved	\$	200.00
		Balance Due			\$	4,750.00
2.	\$_3	310.00 of the	e filing fee has been paid.			
3.	The	source of the co	mpensation paid to me was:			
		Debtor	☐ Other (specify):			
4.	The	source of compe	ensation to be paid to me is:			
		Debtor	☐ Other (specify):			
5.	= 1	I have not agreed	d to share the above-disclosed c	ompensation with any other pers	on unless they are mem	bers and associates of my law firm
				pensation with a person or person e names of the people sharing in		or associates of my law firm. A ached.
5.	In re	eturn for the abo	ve-disclosed fee, I have agreed	to render legal service for all asp	pects of the bankruptcy of	case, including:
	b. P c. R	Preparation and f Representation of Other provisions Exemptio	filing of any petition, schedules, f the debtor at the meeting of cr s as needed] n planning, Means Test pla	endering advice to the debtor in statement of affairs and plan wheditors and confirmation hearing anning, and other items if spal rule. May include fee paid	nich may be required; a, and any adjourned hea pecifically included in	rings thereof; n attorney/client fee contract
7.	Ву а	Represen	tation of the debtors in any	d fee does not include the follow dischargeability actions, recluded in attorney/client fee	elief from stay actior	ns or any other adversary d by Bankruptcy Court local
		each, Jud	lgment Search: \$10 each, C	e, include such things as: P credit Counseling Certificati client, Use of computers for	on: Usually \$15 per	client, Financial Management

Managment Class: \$10 per session, or paralegal typing assistance regarding credit counseling briefing: \$75 per

session.

In re	Shawn Kelvin Whitaker Tonja Richardson Whitaker	Case No.	
	Debtor(s)	_	

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	(Continuation Sheet)
	CERTIFICATION
I certify that the foregoing is a complete statementhis bankruptcy proceeding.	at of any agreement or arrangement for payment to me for representation of the debtor(s) in
October 12, 2018 Date	/s/ Josh Hillin for LOJTO Josh Hillin for LOJTO 28288 Signature of Attorney The Law Offices of John T. Orcutt, PC 6616-203 Six Forks Road Raleigh, NC 27615 (919) 847-9750 Fax: (919) 847-3439 postlegal@johnorcutt.com Name of law firm

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	
\$7	75	administrative fee	
+ \$1	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:					
Debtor 1	Shawn Kelvin Whitaker				
Debtor 2 (Spouse, if filing)	Tonja Richardson W	/hitaker			
United States Bankruptcy Court for the:		Eastern District of North Carolina (NC Exemptions)			
Case number (if known)					

Check as directed in lines 17 and 21:								
	According to the calculations required by this Statement:							
 1. Disposable income is not determined 11 U.S.C. § 1325(b)(3). 								
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
3. The commitment period is		3. The commitment period is 3 years.						
		4. The commitment period is 5 years.						
	_							

 $\hfill\Box$ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same regtal property, but the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space

						Colui Debt		 mn B or 2 or filing spouse
Your gross wages, salary, payroll deductions).	tips, bonus	es, overtime	, and	commissions (befo	ore all	\$	2,364.83	\$ 0.00
Alimony and maintenance Column B is filled in.	payments. I	Do not include	e payr	ments from a spous	e if	\$	0.00	\$ 0.00
All amounts from any source of you or your dependents, from an unmarried partner, mand roommates. Do not incluyou listed on line 3. Net income from operating	, including on nembers of y de payments	child suppor your househo s from a spou	t. Incl ld, you use. D	ude regular contribu ur dependents, pare o not include payme	tions nts, ents	\$	0.00	\$ 0.00
business, profession, or fa	rm Debt	or 1		Debtor 2				
Gross receipts (before all deductions)	\$	0.00	\$_	1,725.83				
Ordinary and necessary operating expenses	- \$	0.00	-\$_	571.16				
Net monthly income from a business, profession, or farm	\$	0.00	\$_	1,154.67 h	opy ere -> \$	s	0.00	\$ 1,154.67
Net income from rental and	l other real	property	Debt	or 1				
Gross receipts (before all dec	ductions)		\$	0.00				
Ordinary and necessary open	rating expen	ses	-\$	0.00				
Net monthly income from ren	tal or other i	real property	\$	0.00 Copy h	ere -> 9	6	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2	Shawn Kelvin Whitaker Tonja Richardson Whitaker			Case numbe	er (<i>if known</i>)		
				Column A Debtor 1		Column B Debtor 2 o	
				\$	0.00	\$	0.00
	terest, dividends, and royalties			· 			
	nemployment compensation			\$	0.00	\$	0.00
the	o not enter the amount if you contend the Social Security Act. Instead, list it here	e:	as a benefit unde	r			
	For you	\$	0.00				
	For your spouse	\$	0.00				
	ension or retirement income. Do not in nefit under the Social Security Act.	nclude any amount receiv	ed that was a	\$	0.00	\$	0.00
Do red do	come from all other sources not listed to not include any benefits received under ceived as a victim of a war crime, a crimen mestic terrorism. If necessary, list other all below.	er the Social Security Act ne against humanity, or in	or payments ternational or	\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate page	nes if any		\$	0.00	\$	0.00
	Total amounts from Sopulate pa	,00, ii airy.			7		
	alculate your total average monthly in ch column. Then add the total for Colur			2,364.83	+ \$ _	1,154.67	= \$ 3,519.50
Part 2:	Determine How to Measure You	Deductions from Incon	10				Total average monthly income
	opy your total average monthly incomplete the marital adjustment. Checonyou are not married. Fill in 0 below.						\$3,519.50
_							
	You are married and your spouse is	filing with you. Fill in 0 bel	ow.				
	You are married and your spouse is Fill in the amount of the income liste dependents, such as payment of the Below, specify the basis for excludin	d in line 11, Column B, that spouse's tax liability or the	e spouse's suppo	ort of someon	e other tha	an you or you	ır dependents.
	adjustments on a separate page.	•				·	
	If this adjustment does not apply, en	ter 0 below.					
					_		
	Total		\$	0.0	0 Co	py here=>	0.0
14. Y	our current monthly income. Subtra	ct line 13 from line 12.					\$3,519.50
15 ^	'alculate your current menthly incom	e for the year Ealland	oso stono:				
	Calculate your current monthly incom 5a. Copy line 14 here=>	ie for the year. Follow th	·				\$3,519.50
	Multiply line 15a by 12 (the number						x 12
1	5b. The result is your current monthly	income for the year for th	is part of the form				\$ 42,234.00

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Debto Debto			ja Richardson Whitaker		Case number (if known)			_
16	. Calc	culate	the median family income that applies to you.	Follow these ste	eps:			
	16a.	. Fill ir	the state in which you live.	NC	-			
	16b.	. Fill ir	n the number of people in your household.	3				
	16c.	Fill in	n the median family income for your state and size	of household.			s 66,361.00	0
			nd a list of applicable median income amounts, go uctions for this form. This list may also be available		e link specified in the separate			_
17.	. How	v do t	he lines compare?					
	17a.		Line 15b is less than or equal to line 16c. On the 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT		•			ınder
	17b.	. [Line 15b is more than line 16c. On the top of part 1325(b)(3). Go to Part 3 and fill out Calculati your current monthly income from line 14 above	on of Your Disp				
Part	t 3:	Ca	Iculate Your Commitment Period Under 11 U.S.	.C. § 1325(b)(4)				
18.	Сор	у уо	ur total average monthly income from line 11 .			\$	3,519	.50
19.	cont spot	end t	ne marital adjustment if it applies. If you are main that calculating the commitment period under 11 U. income, copy the amount from line 13.	rried, your spous .S.C. § 1325(b)(4	se is not filing with you, and you	- \$_	0	.00
	19b.	. Sub	tract line 19a from line 18.			\$	3,519.50	<u>D</u>
20.	Calc	culate	your current monthly income for the year. Fo	llow these steps:	:			
	20a.	Cop	y line 19b				\$3,519.50	0
		Mult	iply by 12 (the number of months in a year).			ſ	x 12	
	20b.	. The	result is your current monthly income for the year	for this part of the	e form		\$ 42,234.00	<u>D</u>
	20c.	Cop	y the median family income for your state and size	of household fro	om line 16c		\$ 66,361.00	<u>o</u>
	21.	How	do the lines compare?			_		
			Line 20b is less than line 20c. Unless otherwise o period is 3 years. Go to Part 4.	rdered by the co	ourt, on the top of page 1 of this form, c	heck box	3, The commitm	ent
			Line 20b is more than or equal to line 20c. Unless commitment period is 5 years. Go to Part 4.	otherwise order	red by the court, on the top of page 1 o	f this forn	n, check box 4, 7	'he

Shawn Kelvin Whitaker

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n on this statement and in any attachments is true and correct.			
χ /s/ Tonja Richardson Whitaker			
Tonja Richardson Whitaker Signature of Debtor 2			
Date October 12, 2018 MM / DD / YYYY			
r			

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Employment Security Commission American Credit Acceptance Jefferson Capital Systems, LLC Attn: Benefit Payment Control Attn: Officer Post Office Box 7999 Post Office Box 26504 340 East Main Street, Suite 400 Saint Cloud, MN 56302-9617 Raleigh, NC 27611-6504 Spartanburg, SC 29302 NC Child Support American Credit Acceptance Mariner Finance Centralized Collections Post Office Box 3628 1364 Benvenue Road Post Office Box 900006 Greenville, SC 29608-3628 Rocky Mount, NC 27804 Raleigh, NC 27675-9006 Equifax Information Systems LLC Badcock Mariner Finance P.O. Box 740241 1473 Wesleyan Blvd Post Office Box 44490 Atlanta, GA 30374-0241 Rocky Mount, NC 27804 Baltimore, MD 21236-4490 Experian Centra Credit Union Midland Funding LLC P.O. Box 2002 Post Office Box 31112 16 Mcleland Rd Allen, TX 75013-2002 Tampa, FL 33631-3112 Suite 101 Saint Cloud, MN 56303 Trans Union Corporation CenturyLink Nash County Tax Dept. Post Office Box 4300 120 West Washington Street P.O. Box 2000 Crum Lynne, PA 19022-2000 Carol Stream. IL 60197-4300 Suite 2058 Nashville, NC 27856 Internal Revenue Service (ED)** Finance America Nuvell Credit Corp Post Office Box 7346 Post Office Box 270100 Attn: Managing Agent Post Office Box 380901 Philadelphia, PA 19101-7346 Louisville, CO 80027 Bloomington, MN 55438-0901 US Attorney's Office (ED)** **GEICO** Nuvell Financial Services Corp. 310 New Bern Avenue Post Office Box 23356 Post Office Box 380901 Suite 800, Federal Building Pittsburgh, PA 15222-3356 Minneapolis, MN 55438-0901 Raleigh, NC 27601-1461

North Carolina Dept. of Revenue** Post Office Box 1168 Raleigh, NC 27602-1168 GFS/Kay Jewelers P.O. Box 4485 Beaverton, OR 97076

Jefferson Capital Systems, LLC Post Office Box 772813 Chicago, IL 60677-2813

Rent a Center 953 N Wesleyan Blvd. Rocky Mount, NC 27804

Post Office Box 2625

Chesterfield, VA 23832

Professional Credit Solutions, LLC

Absolute Collection Service 421 Fayetteville Street Mall Suite 600 Raleigh, NC 27601 RJM Acquisitions Funding, LLC PO Box 29622 Raleigh, NC 27626 US Cellular 4700 South Garnett Road Tulsa, OK 74146-5299

RTO National PO BOX 9759 Greenville, SC 29604 US Dept of Education/Great Lakes Ed Post Office Box 7860 Madison, WI 53704

Select Portfolio Servicing Attn: Managing Agent 3815 South West Temple Street Salt Lake City, UT 84115-4412 Wells Fargo Dealer Services Attn: Managing Agent Post Office Box 19657 Irvine, CA 92623

Southern Credit Adjusters Post Office Box 2764 Rocky Mount, NC 27801-2764 Wells Fargo Dealer Services Attn: Officer Post Office Box 168048 Irving, TX 75016-8048

Sprint Post Office Box 629023 El Dorado Hills, CA 95762

Sprint Attn Bankruptcy Dept 6200 Sprint Parkway Overland Park, KS 66251

TD Bank USA/Target 3701 Wayzata Boulevard Minneapolis, MN 55416

The Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615

UNC Healthcare 200 Eastowne Drive Chapel Hill, NC 27514-2293

United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

In re	Snawn Kelvin Whitaker Tonja Richardson Whitaker		Case No.		
	-	Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereb	v verify	that the attached l	list of creditors	is true and co	orrect to the best	of their knowledge
The above-hamed Debtors hereb	y v CIII y	mai me anaciica i	iist of cicultors	is true and co	officer to the best	oi uicii kiiowicuge.

Date:	October 12, 2018	/s/ Shawn Kelvin Whitaker	
		Shawn Kelvin Whitaker	
		Signature of Debtor	
Date:	October 12, 2018	/s/ Tonja Richardson Whitaker	
		Tonja Richardson Whitaker	
		Signature of Debtor	